

DESCRIPTION / SPECIFICATIONS / WORK STATEMENT
“HYDRAULIC PUMPING FOR DEWATERING OF SWAN LAKE“

1. GENERAL.

1.1 Scope of Work. Work shall consist of furnishing all necessary equipment, materials and labor required to satisfactorily perform the hydraulic pumping for the dewatering of Swan Lake in accordance with the specifications contained herein. All work shall be performed to the satisfaction of the Contracting Officer.

1.2 Omissions. These specifications may duplicate or not cover all specified activities, steps and / or procedures required to accomplish work. In case of omission, the normal industry standard, practices, specification and / or guides shall prevail. In no instance shall an omission be a reason to perform inferior work, produces a less than acceptable product or service, or refuse to perform an intended activity.

1.3 Contracting Officer. The term "Contracting Officer" shall mean the person executing this contract on behalf of the Government, and any other officer or civilian employee who is properly designated Contracting Officer; and the term shall include, except as otherwise provided in this contract, the authorized representative of a Contracting Officer acting within the limits of his authority.

1.4 Safety. The Contractor shall perform all work in accordance with safety requirements set forth in Corps of Engineers' Manual, EM 385-1-1, entitled "Safety and Health Requirements Manual", April 1981 (Revised October 1987), copies of which are available for review at the Rivers Project Office. Any equipment or material found not in conformity with the requirements of this contract shall be removed from government property immediately.

1.4.1 Accident Reporting. An accident constitutes an incident or act involving the Contractor which may or may not have caused obvious damage to persons or property. All accidents shall be reported to the Contracting Officer within twenty-four (24) hours of the occurrence. All serious accidents, defined as those resulting in death or injury requiring medical attention, shall be reported immediately.

1.4.2 Safety Report. At the end of this contract, the Contractor shall submit in writing the total employee hours worked by Contractor employees. This report will include detailed descriptions of any accidents or injuries sustained within contract limits by Contractor employees during the month, including copies of documents for claims under Workman's Compensation.

1.5 Locations / Contract Limits. Location of the work to be performed shall be at Mississippi River Nine Foot Navigation Project, Melvin Price Locks and Dam Project, Swan Lake, Calhoun County, Illinois shown in Appendix A and B contained herein. A site visit to the pump site is scheduled for approximately one (1) week after the issuance of the Request for Quotations (RFQ), where prospective bidders are to meet at the

entrance gate to the pump site, one (1) mile south of the Brussels Ferry landing on Highway 100, Calhoun County, Illinois.

1.6 Access. The Government will provide the Contractor access, including lock keys, to the pumping site through a locked barricade provided the Contractor notifies the Government twenty-four (24) hours in advance. **NOTICE: The Contractor shall maintain the barricade in a locked position at all times except for immediate ingress and egress to the pumping site. The Contractor shall not allow any persons other than Contractor or Government personnel access to the pumping site at any times.**

1.6 Order and Coordination of Work. The Contractor shall perform the work in the order and sequence described herein, in accordance with the Contractor's workplan, and at the direction of the Contracting Officer. The Contractor shall work in coordination with Government work crews to accomplish the work to the fullest extent possible. The Contractor will be notified twenty-four (24) hours in advance of any scheduled shift changes or initial scheduled shift engagements.

1.7 Quality Control Program. The Contractor shall establish and maintain a complete quality control program for all operations to assure the requirements of the contract are provided as specified. The program will include an inspection system covering all the materials and operations stated in the contract. The system must specify operations, materials and equipment to be inspected on either a scheduled or unscheduled basis and the individuals who will perform the inspections.

1.8 Work Plan. The Contractor shall provide to the Government for approval within three (3) working days after award a workplan as shown in Appendix C. The Contractor shall be capable of mobilization to the site and pumping operations no later than five (5) working days after award. No work shall take place until the Government has approved the Contractor workplan.

2. DESCRIPTION OF THE WORK.

2.1 Mobilization and Demobilization.

2.1.1 Mobilization. The Contractor shall deliver and install at the pumping site all equipment and materials necessary for dewatering pumping operations no later five (5) days after award in accordance with the description of work contained herein. The Contractor shall install and anchor the pump support beam to the existing concrete bridge ledge.

2.1.2 Demobilization. The Contractor shall remove from the pumping site all equipment and materials used during pumping operations, except the installed pump support beam, no later than five working days after all operations are completed. The installed pump support beam shall be left in place and shall become the property of the Government. Title to the beam shall pass to the Government after completion of demobilization.

2.1.3 Payment. Payment for all work under this section will be made at the respective contract sum job price for “Mobilization and Demobilization” which price and payment shall constitute full compensation for the cost of all plant, labor, material, and equipment necessary to complete the work specified herein.

2.2 Submersible Electric Dewatering Pumps with Operator. The Contractor shall dewater the pump site with either one, two, three or four submersible electric dewatering pumps at any combination of day and night series of eight (8) hour shift times as directed by the Government. The Contractor shall suspend and center the four pumps on the four stop log bays from the pump suspension beam to a depth capable of efficient pumping to a dewatering elevation of 414.0 NGVD. The Contractor shall install discharge hoses over the stop log bays with stop logs installed at elevation 423.0 NGVD. The Contractor shall be required to pump any combination of specified eight hours shifts, with a minimum of three consecutive weekday shifts as directed by the Government.

2.2.1 Payment. Payment for all work under this section will be made at the contract respective “Base” and “Additional” per eight (8) hour shift sum job price for operation of any combination of the four pumps for “Pumping – Weekday Day Shift” and “Pumping – Weekday Night Shift”, which prices and payments shall constitute full compensation for the cost of all plant, labor, and equipment necessary to complete the work specified herein. The Contractor shall be required to perform “Additional” eight (8) hour shift pump operation job at the sole option, discretion and direction of the Government.

3. EQUIPMENT AND MATERIALS.

3.1 Maintenance / Repairs. The Contractor shall provide all maintenance and repairs necessary for the operation and maintenance of Contractor equipment. Equipment shall be inspected before and after each service and maintained in a safe and good working condition.

3.2 Storage. The Contractor may store Contractor equipment and materials on Government property during the duration of this contract. The Government assumes no responsibility for the safety or security of equipment and materials stored on Government property.

3.4 Contractor Furnished Equipment and Materials. The Contractor shall provide the following equipment and materials necessary to perform the work.

3.4.1 Submersible Electric Dewatering Pumps. The Contractor shall provide four (4) submersible electric dewatering pumps similar or equal to in all capacities to a model BIBO BS-2250 Submersible Pump with standard (MT) impeller code 432 as manufactured by ITT FLYGT Corporation, Trumbull, Connecticut. Pumps shall include all labor, operators, support equipment, materials and supplies necessary for the complete and efficient performance operation of any or all pumps simultaneously, including but not limited to discharge hose, suspension cable, portable electric supply and fuel.

3.4.2 Pump Support Beam. The Contractor shall provide one W 16 X 30 steel I beam for the suspension of all four pumps and necessary anchorage hardware.

4. PERSONNEL.

4.1 Labor. The Contractor shall, except as otherwise provided herein, furnish all labor required to satisfactorily perform the work described herein.

4.2 Operators. All operators shall be thoroughly qualified in the operation of Contractor equipment and shall, except as otherwise provided herein, be furnished by the Contractor.

4.3 Supervision. The Contractor shall provide adequate supervision of Contractor personnel to insure compliance with the contract specifications.

5. INSPECTION AND ACCEPTANCE.

5.1 Inspection. The work described herein will be conducted under the general direction of the Contracting Officer and is subject to inspection by his appointed inspectors to insure strict compliance with the terms of the contract. No inspector is authorized to change any provision of the specifications without written authorization of the Contracting Officer, nor shall the presence or absence of an inspector relieve the Contractor from any requirements of the contract.

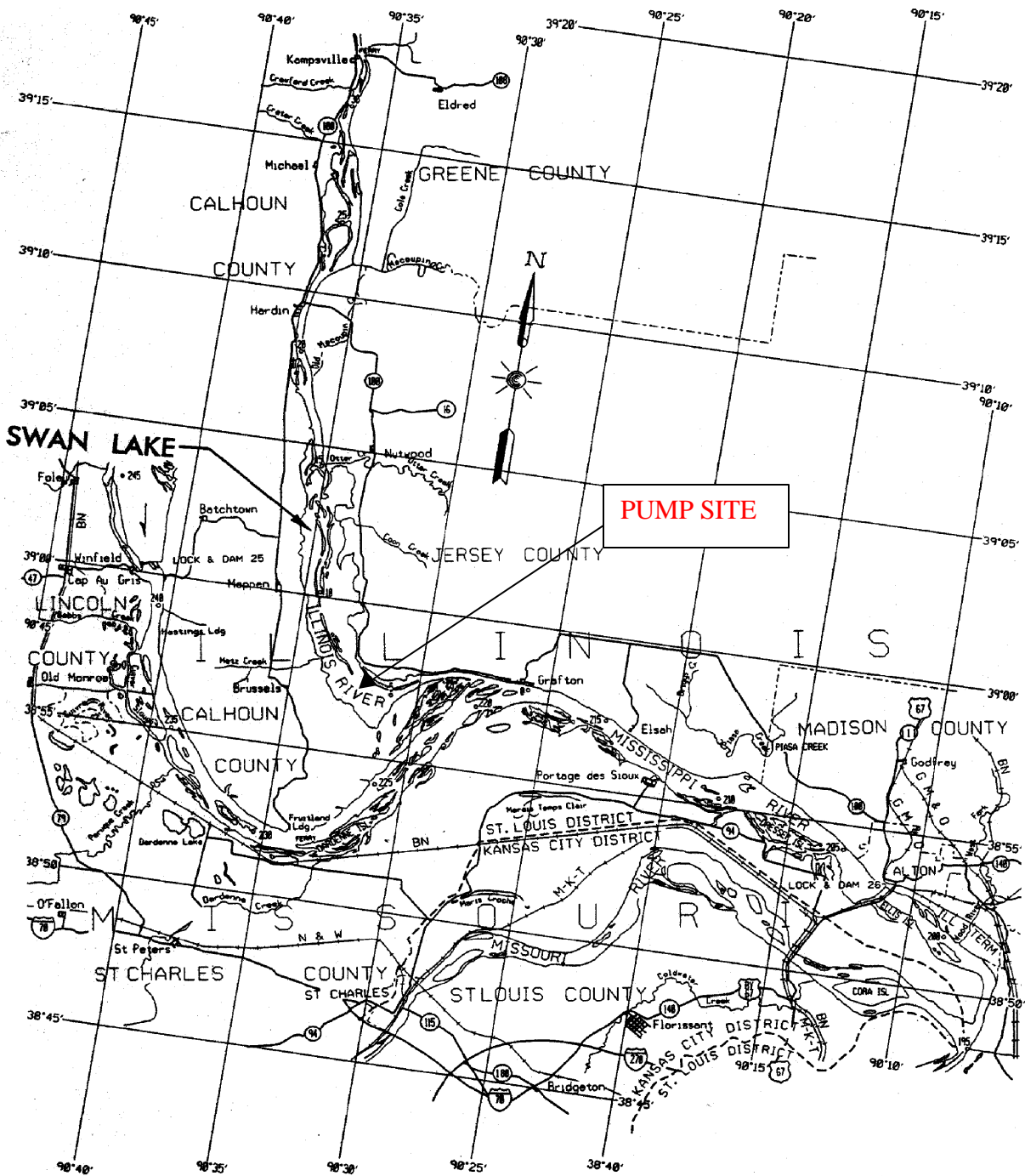
5.2 Acceptance. Formal acceptance will be made by the Contracting Officer for and in behalf of the Government.

6. CONTRACT ADMINISTRATION DATA.

6.1 Payment. Payment shall be made as soon as practicable after acceptance and completion of all required work specified herein and upon receipt of the correct invoice in quadruplicate and in accordance with paragraph 3, General Provisions, DD Form 1155. Invoice shall also contain the Contractor's name and address, exactly as it appears in Block 9 of DD Form 1155. Each invoice shall be sent directly to the Rivers Project Office, 301 Riverlands Way, West Alton, MO, 63386-0337, Attention Mr. John Cannon.

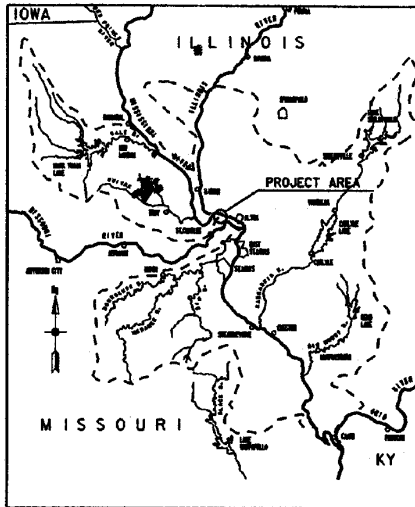
7. SPECIAL CONTRACT REQUIREMENTS.

7.1 Quality Assurance. The Government shall monitor the Contractor's performance under this contract using 100% quality assurance procedures.



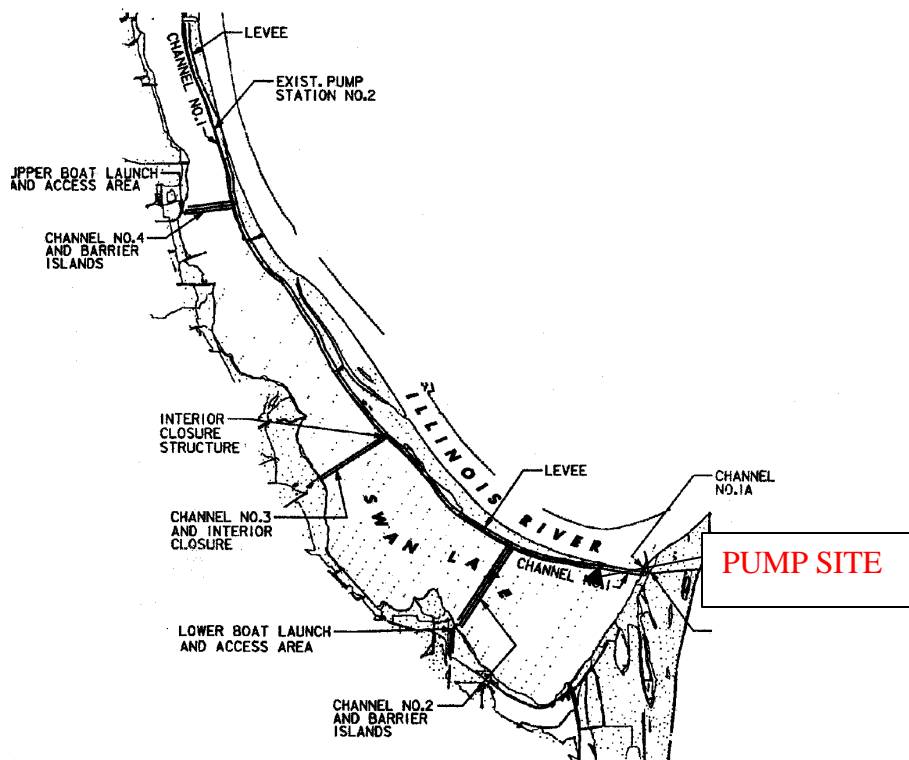
PROJECT LOCATION

APPROX. SCALE IN MILES



VICINITY MAP

APPROX. SCALE IN MILES
35 0 35 70



SITE MAP

NO SCALE

GENERAL INFORMATION / PERSONNEL

CONTRACTOR NAME: _____ CONTRACT NUMBER:

CONTRACTOR:

NAME:

ADDRESS:

PHONE NO: AC (____) _____ FAX NO: AC (____)

CONTRACTOR'S AUTHORIZED REPRESENTATIVE:

NAME:

ADDRESS:

PHONE NO: REG. AC (____) _____ IRREG. AC (____)

CONTRACTOR SUPERVISOR (S):

NAME:

ADDRESS:

PHONE NO: AC (____) _____ AC (____)

NAME:

ADDRESS:

PHONE NO: AC (____) _____ AC (____)

CONTRACTOR SCHEDULE / EMPLOYEES:

AREA / PHASE OF WORK:

SUPERVISOR: _____ START DATE: _____ END DATE:

EMPLOYEES: SKILL / TRADE: _____ NUMBER:

EMPLOYEES: SKILL / TRADE: _____ NUMBER:

EMPLOYEES: SKILL / TRADE: _____ NUMBER:

WORK / CREW DESCRIPTION / DETAIL:

AREA / PHASE OF WORK:

SUPERVISOR: _____ START DATE: _____ END DATE:

EMPLOYEES: SKILL / TRADE: _____ NUMBER:

EMPLOYEES: SKILL / TRADE: _____ NUMBER:

EMPLOYEES: SKILL / TRADE: _____ NUMBER:

WORK / CREW DESCRIPTION / DETAIL:

____ APPROVED

SIGNATURE DATE
CONTRACTOR AUTHORIZED REPRESENTATIVE
REPRESENTATIVE

SIGNATURE
CONTRACTING OFFICER

CONTRACTOR WORK PLAN

EQUIPMENT

CONTRACTOR NAME: _____ CONTRACT NUMBER: _____

CONTRACT NUMBER:

[illegible]

_____ APPROVED

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CONTRACTOR WORK PLAN	

APPENDIX C-2

<u>MATERIALS</u>			
CONTRACTOR NAME: _____ CONTRACT NUMBER: _____ _____			
AREA / PHASE OF WORK: _____ _____			
DESCRIPTION	DIMENSION / SIZE	UNIT	QUANTITY
AREA / PHASE OF WORK: _____ _____			
DESCRIPTION	DIMENSION / SIZE	UNIT	QUANTITY

_____ APPROVED

SIGNATURE

DATE

CONTRACTOR AUTHORIZED REPRESENTATIVE

REPRESENTATIVE

SIGNATURE

CONTRACTING OFFICER

CONTRACTOR WORK PLAN

APPENDIX C-3

QUALITY CONTROL PROGRAM

CONTRACTOR NAME: _____

CONTRACT NUMBER: _____

METHODS OF CORRECTING DEFICIENCIES (DESCRIBE):

1. _____

2. _____

3. _____

AREA / PHASE OF WORK:

QUALITY CONTROL INSPECTOR NAME:

SCHEDULE INSPECTIONS (DESCRIBE):

1. _____

2. _____

3. _____

4. _____

UNSCHEDULED INSPECTIONS (DESCRIBE):

1. _____

2. _____

3. _____

4. _____

____ APPROVED

SIGNATURE DATE
CONTRACTOR AUTHORIZED REPRESENTATIVE
REPRESENTATIVE

SIGNATURE
CONTRACTING OFFICER

CONTRACTOR WORK PLAN

ACCIDENT PREVENTION PROGRAM

CONTRACTOR NAME: _____ CONTRACT NUMBER:

ADMINISTRATIVE PLAN

Willingness to correct safety hazards detected by the Corps is commendable, but a poor substitute for a positive program that prevents or detects and corrects hazards.

Contractor	Contract Name & Number		Date
1	2		3
Project Superintendent	Shifts / day	Hours / shift	Maximum employees / shift
4	5	5a	5b

Superintendent's training in Corps' safety requirements

6

Major Units of Equipment

7

Who will inspect equipment?	Inspector's qualifications	Inspection frequency?
8	8a	8b
Who is responsible for operators' physicals?	Location of all records	Day and hour weekly safety meeting
9	10	11

Who is responsible for employee training?

12

Who will orient new employees?

13

Who is responsible for clean-up?

14

Where will drinking water be obtained?

15

Who will investigate accidents?

16

Who is responsible for providing personal protective equipment?

17

Name Doctors, Hospitals & Ambulance services with whom arrangements have been made for this contract.

Doctor	Hospital	Ambulance
18	18a	18b

What form of communication will be used to summon ambulance?

18c

____ APPROVED

SIGNATURE DATE
DATE
CONTRACTOR AUTHORIZED REPRESENTATIVE
REPRESENTATIVE

SIGNATURE
CONTRACTING OFFICER

CONTRACTOR WORK PLAN

APPENDIX C-5

ACCIDENT PREVENTION PROGRAM (CONT')

CONTRACTOR NAME: _____ CONTRACT NUMBER:

ADMINISTRATIVE PLAN

Names of first aid attendants having certificates	Type of certificate and expiration date	Names of U.S.C.G. licensed boat operators, type of license and expiration date
---	---	--

19

19a

20

21 Fire Fighting Equipment

22 First Aid Kits

23 Wash
Facilities

24 Toilets

No.	Rating	Type	Location
-----	--------	------	----------

No.	Type
-----	------

No.	Type
-----	------

No.	Type
-----	------

What flammable or combustible liquids or gases will be on job site?

25

Where and how will flammables and combustibles be stored?

26

Who will be responsible for inspection and maintenance of fire fighting equipment?

If the Company has a published statement of safety policy, please transmit a copy with the return of your Accident Prevention Program.

On a separate sheet submit your proposed layout of temporary buildings and facilities (including subcontractors) and traffic patterns including access roads, haul roads, R.R.s, utilities, etc.

The _____ will pursue a positive program of training,

(Company)

inspections and hazard control throughout the term of this contract. Mr./ Ms.

_____ has the responsibility and authority for enforcing them.

_____ APPROVED

SIGNATURE

DATE

SIGNATURE

DATE

CONTRACTOR AUTHORIZED REPRESENTATIVE
REPRESENTATIVE

CONTRACTING OFFICER

CONTRACTOR WORK PLAN

APPENDIX C-5 (CONT')

ACCIDENT PREVENTION PROGRAM (CONT')

CONTRACTOR NAME: _____ CONTRACT NUMBER: _____

JOB HAZARD ANALYSIS

1. Contract No.	2. Project	3. Facility	
4. Data	5. Location	6. Estimated Start Date	
7. Item	8. Phase of Work	9. Safety Hazard	10. Precautionary Action Taken

<div>_____ APPROVED</div> <div><div><div>_____ SIGNATURE DATE CONTRACTOR AUTHORIZED REPRESENTATIVE REPRESENTATIVE</div><div>DATE</div></div><div><div>_____ SIGNATURE CONTRACTING OFFICER</div></div></div>			
CONTRACTOR WORK PLAN			